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CONFIRMATION NO. 8550

<b>SERIAL NUMBER</b> 10/693,258	<b>FILING OR 371(c) DATE</b> 10/24/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> IOWA:059US
<b>APPLICANTS</b> Jack T. Stapleton, Iowa City, IA; Jinhua Xiang, Iowa City, IA; Sarah George, Saint Louis, MO; <i>MAZ</i>				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/421,408 10/24/2002 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 02/18/2005</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> IA	<b>SHEETS DRAWING</b> 44	<b>TOTAL CLAIMS</b> 34
<b>INDEPENDENT CLAIMS</b> 12				
<b>ADDRESS</b> 32425				
<b>TITLE</b> GB virus C and methods of treating viral infections <i>MAZ</i>				
<b>FILING FEE RECEIVED</b> 1710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	